

Package Design Research & Test Lab.

Approved by

WAL*MART

CONSULTANCY REQUEST FORM

Name of Person: _____ Designation : _____

Name of Co. _____

Address of Communication _____

Email _____ Tel. No. _____

Mob. No. _____

Manufacturer of Corrugated Box User of Corrugated Box

I wish to avail services of PDR&TL for following (kindly (✓) those required)

- Reduce cost of corrugated packaging.
- Reduce breakage of goods in transit.
- Want to redefine the specifications of corrugated boxes to suit my requirement.
- Want to manufacture boxes meeting required Bursting Strength in most economical way.
- Want to make boxes meeting required ECT in most economical way.
- Want to make boxes whose Cobb is according to specified norms.
- Want that my ready to ship boxes could pass ISTA 1A, 1B, 1C, 2A, 2B, 2C or 3A Vibration cum Drop Test.
- Want to trouble shoot my packaging / corrugated box problem.
Please specify the problem. _____

- Any other - please specify _____

Please scan and email to pdrtlindia@gmail.com

Signature

Associated with



Please contact

Package Design Research & Test Lab

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visit us at www.pdrtl.in